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Patent Application  
Attorney Docket No.: 58769.000011

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of : )  
EMORINE, L., et al. ) Examiner: Ulm, J.  
Serial No.: 09/895,211 ) Group Art Unit: 1646  
Filed: July 02, 2001 )  
For: INTRON/EXON STRUCTURE OF THE HUMAN AND MOUSE  
BETA3-ADRENERGIC RECEPTOR GENES

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TECH CENTER 1600/2900

**TRANSMITTAL LETTER**

Under Secretary of Commerce for Intellectual Property  
and Director of the United States Patent and Trademark Office  
Washington, D.C. 20231

Sir:

The following are enclosed for consideration in the above-identified application:

	FEE
<input type="checkbox"/>	\$
<input checked="" type="checkbox"/>	Response to Notice to File Missing Parts
<input checked="" type="checkbox"/>	\$
<input type="checkbox"/>	Response to Office Action mailed September 26, 2002
<input type="checkbox"/>	\$
<input type="checkbox"/>	Declaration: <input type="checkbox"/> Original; <input type="checkbox"/> Supplemental
<input type="checkbox"/>	\$
<input type="checkbox"/>	Submission of Formal Drawings
<input type="checkbox"/>	\$
<input type="checkbox"/>	Informal Drawings: _____ Sheets _____ Figures
<input type="checkbox"/>	\$
<input type="checkbox"/>	Supplemental Information Disclosure Statement, Form PTO SB/08A, copy of International Search Report, and three (3) references
<input checked="" type="checkbox"/>	\$
<input checked="" type="checkbox"/>	Amendment: <input type="checkbox"/> Preliminary; <input type="checkbox"/> § 116; <input type="checkbox"/> § 312; <input type="checkbox"/> Other
<input checked="" type="checkbox"/>	\$410.00
<input type="checkbox"/>	Request for Two-Month Extension of Time
<input type="checkbox"/>	\$
<input type="checkbox"/>	Issue Fee: <input type="checkbox"/> Part B - Issue Fee Transmittal <input type="checkbox"/> Part C - Charge to Deposit Account
<input type="checkbox"/>	\$
<input type="checkbox"/>	Notice of Appeal
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<input type="checkbox"/>	Appeal Brief
<input type="checkbox"/>	\$
<input type="checkbox"/>	Request for Oral Hearing
<input type="checkbox"/>	\$
<input type="checkbox"/>	Reply Brief
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<input type="checkbox"/>	Terminal Disclaimer
<input type="checkbox"/>	\$
<input type="checkbox"/>	An additional claim fee is required, and is calculated as shown below
<b>TOTAL FEES BEING SUBMITTED</b>	<b>\$410.00</b>

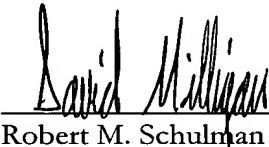
	Claims Remaining	Claims Paid For	Extra	Rate	Fee
Total Claims		20	0	x \$18.00	\$
Independent Claims		3	0	x \$84.00	\$
Multiple Dependent Claims (if applicable)				\$	\$
				<b>TOTAL EXCESS CLAIMS FEE</b>	\$
SMALL ENTITY TOTAL (if applicable)					\$ .00

The Commissioner is hereby authorized to charge payment of any additional filing fees required under 37 CFR § 1.16 and § 1.17 associated with this communication or credit any overpayment to the deposit account of Hunton & Williams, Deposit Account Number 50-0206.

Respectfully submitted,

Date: February 26, 2003

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